

Surgical Post- Operative Orders

Please use a ✓ An X can mean NO orders required.

Patient sticker
U.R. number.....

Surname.....

Given Name(s).....

Unit Procedure Date.....

General Observations (HR, RR, BP, T, SpO₂)

- | | |
|---|--|
| <input type="checkbox"/> Routine Observation or | <input type="checkbox"/> Specified Observations |
| Every 15 mins for 1 st hour | Every mins for 1 st hr |
| Every 30 mins for next 3hrs | Every mins for next hrs |
| Every 60 mins for next 6 hrs | Every mins for next hrs |
| 4 hourly obs thereafter | ... hourly obs thereafter |
| <input type="checkbox"/> Urine Output Frequency..... | <input type="checkbox"/> Fluid Balance Chart |
| <input type="checkbox"/> Wound | |

Consider locating Rapid Response Team / MET Criteria in this section if applicable:

Each organisation should identify their own numbers and add to pre printed form

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Reportable Limits: Specify limits if different to default

- | | |
|---------------------------------|--------------------|
| Specified: | Default: |
| Heart Rate: < or > | < or > |
| Systolic BP: < or >..... | < or > |
| Resp Rate: < or > | < or > breaths/min |
| SpO ₂ : < | < |
| Temperature: > | > |
| Urine Output: < ml / hour | < ml over hours |
| Drain Output: | |

Specific Observations: (specify type of observations, frequency and reportable limits)

- Neuro** Special chart - See back of form **Stridor** (see guidelines overleaf)
- Vascular** Special chart - See back of form **Other**.....

Other Specific Instructions:

General Care: NB: ALL DRUG ORDERS MUST BE ORDERED ON THE MEDICATION CHART

- Position:**..... **DO NOT**.....
- Mobility:** Strict RIB Other (specify).....
- Diet:** Nil by Mouth Other (specify).....
- NG Tube:** Free drainage Other (specify).....
- DVT Prophylaxis:** LMW Heparin S/C Heparin IV Heparin Nil
(see guidelines overleaf) Graduated Compression Stockings Other.....
- Pain Management:** See Medication Chart PCA Other.....
- Antibiotics:** See Medication Chart Nil at this stage **Anti-emetics:** See Medication Chart Nil
- Oxygen:** Yes.....L/min No
- IV Fluid Orders:** Yes (see IV Fluid order chart) No
- Dressings:**.....

Drains / Special Lines:

What	Type	Site	Management
.....
.....

Drain Output Frequency Check Every hours. Report if

Post-Op Tests Required (Specify what and when): Nil

Referrals:

Completed by: Name: (Print) Signed: Designation: Pager: Date:

2nd DRAFT

Anaesthesia Orders for Ward (Orders for Recovery located on Anaesthetic Record):

Completed by : Name: Signed: Designation: Pager: Date

Handed over to:
Recovery Nurse: Name: Signed: Designation: Date:
Ward Nurse: Name: Signed: Designation: Date:
 (Print) PTO for guidelines

Risk category	DVT Prophylaxis Clinical features		Recommended Prophylaxis[#]
High <input type="checkbox"/>	Surgical inpatient risk factors Orthopaedic surgery of pelvis, hip or lower limb (eg: hip replacement, hip fracture, TKR) Multiple trauma Major surgery* and, age > 60 years Major surgery* and age 40 – 60 years with medical risk factors (see right) OTHER..... <i>*Any intra-abdominal surgery or surgery lasting greater than 45 minutes</i>	Medical inpatient risk factors Ischaemic stroke History of DVT / PE Decompensated heart failure Active* cancer Acute* on chronic lung disease Acute* on chronic inflammatory disease (eg: IBD, Lupus, Rheumatoid arthritis) Age > 60 (unless otherwise well and ambulant and no other risk factors) Thrombophilia (see overleaf) OTHER..... <i>* Condition active this admission - requiring treatment or intervention</i>	LMWH (enoxaparin) or LDUH (sodium heparin) AND Graduated Compression Stockings (GCS) and / or Intermittent Pneumatic Compression (IPC)
Moderate <input type="checkbox"/>	Major surgery* and age 40 – 60 years without medical risk factors Major surgery* and age 16-40 years with medical risk factors (see above right) Minor surgery** and age > 60 years Minor surgery** and age 40-60 years with medical risk factors (see above right) or on oestrogen therapy **Surgery other than abdominal lasting less than 45 minutes		LMWH (enoxaparin) or UFH (sodium heparin)
Low <input type="checkbox"/>	Major surgery*, age 16 – 40 years without medical risk factors Minor surgery**, age 16 – 40 years with medical risk factors (see right) Minor surgery**, age 16 – 60 years without medical risk factors	None of the above medical risk factors	Consider GCS

Vascular observations (see Medical record form.... for detailed instructions and recording chart)

Colour
Temperature
Sensation
Capillary return
Pulses

Neurological Observations (see Medical record form.... for detailed instructions and recording chart)

Glasgow coma scale

- Eye opening
- Best verbal response
- Best motor response

Pupillary response
Limb strength
Vital signs

2nd DRAFT

Stridor

Common Features:

- Restlessness, anxiety and distress, wanting to sit up and using extra muscles to breathe.
- Noisy breathing, particularly on inspiration (stridor).
- Difficulty swallowing / a sore throat / a lump in the neck or shortness of breath.
- Difficulty talking.
- Recent surgery in the neck area.
- The patient may have completely **normal** vital signs, a **normal** oxygen saturation level and may be pink – this should **not** be reassuring, the airway may still be obstructed.

Beware

- Low oxygen saturation levels and cyanosis are late and ominous signs of impending **complete** upper airway obstruction.
- When a patient progresses to complete airway obstruction – stridor and noisy breathing ceases because there is no air movement.
- **Fatigue with a decrease in stridor may signify impending respiratory arrest.**